## Marketing Order Administration Branch Student Career Experience Program (SCEP) Proposed Schedule

Name (print)	
University	
Curriculum	
Year in School & Current GPA	
Proposed Graduation Date	
Proposed 1st Training Period*	
Proposed 2nd Training Period*	· ·

Please list below the courses that you are currently enrolled in, **and** the courses that you intend to complete prior to graduation.\*\*

Course	Semester	Year

<sup>\*\*</sup>Please attach additional pages as necessary.

<sup>\*</sup>You must complete at least 12 months of training **PRIOR** to graduation. It is preferred that the 12 months are completed in 2 consecutive 6-month training periods. However, the 12 months may be completed in 2 non-consecutive training sessions.